

**Provider Inspection Summary**  
For the period 04/01/2003 to 03/31/2006  
Community Based Residential Facility  
CLASS AA (AMBULATORY)

**Facility Information**

**Facility Name:** REIFS HARMONY HOUSE II (0010073)

**Address:** 2303 MARSHALL ST, MANITOWOC, WI 54220

**License Status:** REGULAR

**Licensed/Certified/Registered** 12/01/2003

**Regional Office:** NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

**Survey History**

**Survey ID:** 0095476      **End Date:** 08/25/2005      **Type:** OTHER      **Purpose:** SURVEY/COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0091739      **End Date:** 12/15/2003      **Type:** OTHER      **Purpose:** DESK REVIEW

**Results:** LICENSE/CERT/REGISTRATION ISSUED

**Survey ID:** 0090361      **End Date:** 05/01/2003      **Type:** INITIAL      **Purpose:** SURVEY

**Results:** PROBATIONARY LICENSE ISSUED

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*

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Complaint History
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**Date Complaint Received: 06/24/2005**

**Date Investigation Completed: 08/25/2005**

Subject Area(s)

Result

SOD #

MEDICATIONS

NOT SUBSTANTIATED

PROGRAM SERVICES

NOT SUBSTANTIATED

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